U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

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1. File Number U -

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

3. Name and address of person filing.			4. N	Name, file number, and address of labor organization.		
Name	Jon	P Nicholson	Na	me Motion Pictu	re Studio Mechanics Local 476	
			La	bor Organization File Nu	mber   023-854	
P.O. Box, Bidg., Room No., if any			P.	P.O. Box, Building and Room Number, if any		
Street	500 W Belden Av	'e	St	reet 6309 N North	west Hwy	
City	Elmhurst		Ci	Y Chicago		
State	Illinois	ZIP Code + 4	50126-1857 St	ate Illinois	ZIP Code + 4 60631	
Positi	on in labor organization.	Executive Board Me	ember #1			
		d in transactions (including				
	Lan interest in lengage					
		d in transactions (including loyer whose employees )	our organization re	presents or is actively	seeking to represent.	
noneta	ary value from an emp		your organization re	presents or is actively Nature of Interest, Trans	seeking to represent. action, or Income.	
Name	ary value from an emp	oyer whose employees y	y). 7.a.	Presents or is actively Nature of Interest, Trans Ox Rental " of pe	seeking to represent.	
noneta  Name	ary value from an employer and address of Employer	oyer whose employees or (including trade name, if an	y). 7.a.	Presents or is actively Nature of Interest, Trans Ox Rental " of pe	seeking to represent.  action, or Income.  ersonally owned equipment used	
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Name Name Trade P.O. B Street City State	e and address of Employer and address of Employer Paramount Pictur Name, if any: The Weaton, Bldg., Room No., if and 5555 Melrose Ave.  Los Angeles  California  ignature and verification itted in this report (including)	ther Man  Val. #127  ZIP Code + 4	7.a. 7.b. 7.b. 7.b. 7.b. 7.b. 7.b.	Nature of Interest, Trans  OX Rental " of pering the product  Amount.  y and other applicable pocuments), has been example to the product of	seeking to represent.  action, or Income.  ersonally owned equipment used tion of "The Weather Man."  \$520  enalties of the law, that all of the information mined by the signatory and is, to the best of the	
Name Trade P.O. B Street City State	e and address of Employer and address of Employer Paramount Pictur Name, if any: The Weaton, Bidg., Room No., if at 5555 Melrose Ave.  Los Angeles  California  ignature and verification itted in this report (including signed's knowledge and	ther Man  Val. #127  ZIP Code + 4  The undersigned declares, ing the information contained in	7.a. 7.b. 7.b. 7.b. 7.b. 7.b. 7.b.	Nature of Interest, Trans  ox Rental " of pering the product  Amount.  Amount.	seeking to represent.  action, or Income.  ersonally owned equipment used tion of "The Weather Man."  \$520  enalties of the law, that all of the information mined by the signatory and is, to the best of the	

Name of Person Filing Jon Nicholson	File Number U- 3588					
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.						
Name and address of Business (including trade name, if any).  Name	9. Business deals with:					
Trade Name, if any:	a. Labor Organization b. Trust					
P.O. Box, Bldg., Room No., if any Street	c. Employer					
City State ZIP Code + 4						
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.					
Name Trade Name, if any:						
P.O. Box, Bldg., Room No., if any						
Street	11.b. Approximate dollar value of such dealing.					
City	12.a. Nature of interest held or income received.					
State ZIP Code + 4						
	12.b. Amount.					
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money						
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.  Gifts presented to every crew member on production of "The Weather Man"					
Name Paramount Pictures	-messenger bag -umbrella					
Trade Name, if any: The Weather Man						
P.O. Box, Bidg., Room No., if any Val.#127						
Street 5555 Melrose Ave						
City Los Angeles  State California ZIP Code + 4 90038-3197						
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment. \$75					

Name o	of Person	Filina	Jon	Nicholson
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## Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived in employees your organization represents or is actively seeking to represent.	ncome or other economic benefit of monetary value from an employer whose		
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.		
	"Box Rental" of personally owned equipment used		
Name Long Island Pictures, LLC	during the production of "The Amityville Horror."		
Trade Name, if any: The Amityville Horror			
N. 11.2 - 10. 11.2 - 1			
P.O. Box, Bldg., Room No., if any Ste 1400	The second secon		
	7.b. Amount.		
Street 10900 Wilshire Blvd			
and the second of the second o	\$1,590		
City Los Angeles	•		
State California ZIP Code + 4 90024			
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose		
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
	7.b. Amount.		
Street			
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City .	Name and any distinct and appropriate and appr		
State ZIP Code + 4			
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose		
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
terreturi i transporturi i materia e terreturi e terreturi.			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
	7.b. Amount.		
Street			
City			
City	V savetiment and experience of		
State ZJP Code + 4			
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